Fill in this information to identify your case:							
United States Bankruptcy Court for the:							
District of Western New York							
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13				heck if this is a		heck if this is an mended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Deanna First name J, Middle name Walker Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	First name Middle name Last name First name Middle name Last name Business name (if applicable) Business name (if applicable)	First name Middle name Last name First name Middle name Last name Business name (if applicable) Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 2 3 9 6 OR 9 xx - xx	xxx - xx

Debto	۱r م

Deanna J, Walker
First Name Middle Name Last Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.	EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1100 Michigan Ave Number Street	Number Street
		Apt 403 Buffalo NY 14209 City State ZIP Code	City State ZIP Code
		Erie	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deanna	J, Wa	lker	
First Name	Middle Name	Last Name	

Part 2:	Tell the	Court	About	Your	Bankruptcy	Case
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7.	The chapter of the Bankruptcy Code you		eck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	are choosing to file under	Char	Chapter 7						
		☐ Chap	Chapter 11						
		☐ Chap	ter 12						
		☐ Chap	ter 13						
8.	How you will pay the fee	local your subn	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				ay the fee in installments . If y for Individuals to Pay The Filin					
		By la less pay	I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.						
9.	Have you filed for	X No							
	bankruptcy within the last 8 years?		District	Whe	n	Case number			
			District	Whe	MM / DD / YYYY	Case number			
			District	Whe	MM / DD / YYYY	Case number			
10.	Are any bankruptcy cases pending or being	™ No							
	filed by a spouse who is not filing this case with	☐ Yes.				Relationship to you			
	you, or by a business partner, or by an affiliate?		District	Whe	MM / DD / YYYY	Case number, if known			
			Debtor			Relationship to you			
			District	Whe	MM / DD / YYYY	Case number, if known			
11.	Do you rent your residence?	☐ No. ☑ Yes.	Has you No. Yes	Go to line 12. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as part of this bankruptcy petition.					

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	10	h	to	r	1

Deanna	J, \	Nalker	
First Name	Middle Name		Last Name

Case number	f known)	

Part 3:

Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?A sole proprietorship is a husiness you operate as an

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

■ No. Go to Part 4.								
☐ Yes	. Name and location of business							
	Name of business, if any							
	Number Street							
	City	State	ZIP Code					
	Check the appropriate box to describe your business.	.						
	☐ Health Care Business (as defined in 11 U.S.C. §	101(27A))						
	☐ Single Asset Real Estate (as defined in 11 U.S.C.	§ 101(51B))						
	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))							
	☐ Commodity Broker (as defined in 11 U.S.C. § 101	(6))						
	None of the above							
choosing are a sr most re if any of	ore filing under Chapter 11, the court must know whether to proceed under Subchapter V so that it can set appear all business debtor or you are choosing to proceed under balance sheet, statement of operations, cash-flow these documents do not exist, follow the procedure in I am not filing under Chapter 11.	<i>propriate dea</i> nder Subcha _l v statement, a	ndlines. If you indicate that you opter V, you must attach your and federal income tax return or					
☐ No.	I am filing under Chapter 11, but I am NOT a small but the Bankruptcy Code	usiness debto	or according to the definition in					

Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy

Code, and I do not choose to proceed under Subchapter V of Chapter 11.

Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

De	btor	1
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Deanna	J,	Walker	
First Name	Middle Nam	ie	Last Name

Case number (if known)

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	➤ No ☐ Yes.	What is the hazard?				
public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is	s needed, wh	ny is it needed? _		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number	Street		
			City		 State	ZIP Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to	receive	a briefing	about
credit counseling b			

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before
filed this bankruptcy petition, and I received a
certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days

	I am not required to receive a briefing a	bout
	credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Pá	art 6: Answer These Ques	stions for Reporting Purpo	ses		
16.	. What kind of debts do you have?		arily consumer debts? Corual primarily for a personal, fan	nsumer debts are defined in 11 U.S.C. § 101(8) mily, or household purpose."	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	No. Go to line 16b. Yes. Go to line 17.			
				iness debts are debts that you incurred to obtain ration of the business or investment.	
		No. Go to line 16c.☐ Yes. Go to line 17.			
		16c. State the type of debts yo	ou owe that are not consumer o	debts or business debts.	
17.	Are you filing under Chapter 7?	☐ No. I am not filing under C	Chapter 7. Go to line 18.		
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?			
	excluded and administrative expenses	X No			
	are paid that funds will be available for distribution to unsecured creditors?	☐ Yes			
18.	How many creditors do	X 1-49	1,000-5,000	25,001-50,000	
	you estimate that you owe?	50-99	5,001-10,000	50,001-100,000	
	owe:	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000	
19.	How much do you	\$0-\$50,000	☐ \$1,000,001-\$10 milli		
	estimate your assets to be worth?	\$50,001-\$100,000	\$10,000,001-\$50 mil		
	be worth.	\$100,001-\$500,000 \$500,001-\$1 million	□ \$50,000,001-\$100 m □ \$100,000,001-\$500		
20.	How much do you	\$0-\$50,000	☐ \$1,000,001-\$10 milli		
	estimate your liabilities to be?	\$50,001-\$100,000	\$10,000,001-\$50 mil		
		□ \$100,001-\$500,000 □ \$500,001-\$1 million	\$50,000,001-\$100 m		
Pá	art 7: Sign Below	— \$655,561 \$111111611	— \$100,000,001 \$000		
Fo	or you	I have examined this petition, a correct.	and I declare under penalty of p	perjury that the information provided is true and	
				ay proceed, if eligible, under Chapter 7, 11,12, or 13 ole under each chapter, and I choose to proceed	
		If no attorney represents me a this document, I have obtained		by someone who is not an attorney to help me fill out by 11 U.S.C. § 342(b).	
		I request relief in accordance v	with the chapter of title 11, Unit	ted States Code, specified in this petition.	
			sult in fines up to \$250,000, or	or obtaining money or property by fraud in connection imprisonment for up to 20 years, or both.	
		🗴 /s/ Deanna J, Walker	·	x	
		Signature of Debtor 1		Signature of Debtor 2	
		Executed on 6/24/2024	//000/	Executed on	
		MM / DD	/ Y Y Y Y	MM / DD /YYYY	

Debtor	1

Deanna	J, \	Nalker	
First Name	Middle Name)	Last Name

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

[€] /s/Mark E Lewis	Date	6/24/2024
Signature of Attorney for Debtor		MM / DD /YYYY
Mark E Lewis		
Printed name		
Law Offices of Mark Lewis		
Firm name		
4550 Harris Hill Rd.		
Number Street		
Williamsville	NY	14221
City	State	ZIP Code
Contact phone 716-429-3697	Email addr	ess mlewislawyer.com@gmail.com
2344981	NY	
Bar number	State	

Debtor	1
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Deanna	J,	Walker		
First Name	Middle Na	me	Last Name	

Case number	(if known)
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For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a seconsequences?	erious action with long-te	rm financial and legal
□ No □ Yes		
Are you aware that bankruptcy fraud is a serio inaccurate or incomplete, you could be fined or	•	bankruptcy forms are
□ No □ Yes		
Did you pay or agree to pay someone who is No	not an attorney to help yo	ou fill out your bankruptcy forms?
Yes. Name of PersonAttach Bankruptcy Petition Preparer's N	lotice, Declaration, and Sig	gnature (Official Form 119).
By signing here, I acknowledge that I understate have read and understood this notice, and I attorney may cause me to lose my rights or put	m aware that filing a bank	cruptcy case without an
Signature of Debtor 1	Signature of De	btor 2
Date MM / DD / YYYY	Date	MM / DD / YYYY
Contact phone	Contact phone	
Cell phone	Cell phone	
Email address	Email address	

Fill in this information to identify your case:					
Debtor 1	Deanna J, Walker				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	District of			
Case number	(If known)				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

your original formo, you must im out a non our many and onosk the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$12030.00
1c. Copy line 63, Total of all property on Schedule A/B	\$12030.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$9077.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$19983.58
Your total liabilities	\$29060.58
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2305.33
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2663.00

Debtor 1

Deanna J, Walker

First Name

Middle Name

Last Name

Case number (if known)_

Part 4:

Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - X Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

s 22797.12

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on <i>Schedule E/F</i> , copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$11113.71
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. Total. Add lines 9a through 9f.	\$11113.71

Fill in this information to identify your case and this filing:				
Debtor 1	Deanna J, W			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	r the: Western New York		

Official Form 106A/B

Schedule A/B: Property

12/15

page 1

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. ☐ Duplex or multi-unit building Street address, if available, or other description ☐ Condominium or cooperative Current value of the Current value of the ■ Manufactured or mobile home entire property? portion you own? ☐ Land ■ Investment property Describe the nature of your ownership ■ Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ■ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. ☐ Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the ■ Manufactured or mobile home entire property? portion you own? Land ■ Investment property Describe the nature of your ownership State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

Debtor 1	Deanna .	J, Walker		Case number (if known)
	First Name	Middle Name	Last Name	

1.3. Street address, if available, or other		e, or other description State ZIP Code	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Describe the nature of	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
	County	State Zii Gode	☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this ite property identification number:	(see instructions) em, such as local	
		•	all of your entries from Part 1, including any entries here.		\$0.00
Part 2:	Describe Your \	Vehicles			
Do you oyou own	own, lease, or have leg that someone else drive , vans, trucks, tractors	gal or equitable interess. If you lease a vehic	est in any vehicles, whether they are registered or a le, also report it on Schedule G: Executory Contracts as, motorcycles	•	s
Do you own 3. Cars.	own, lease, or have leg that someone else drive , vans, trucks, tractors	gal or equitable intereses. If you lease a vehicles, sport utility vehicles Chevrolet Equinox	Who has an interest in the property? Check one.	•	aims or exemptions. Put d claims on <i>Schedule D:</i>
Do you oyou own 3. Cars	bwn, lease, or have leg that someone else drive , vans, trucks, tractors o es Make: Model: Year: Approximate mileage:	gal or equitable interests. If you lease a vehicles, sport utility vehicles	le, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i>
Do you own 3. Cars N 3.1.	that someone else drive vans, trucks, tractors o es Make: Model: Year:	chevrolet Equinox 2016 72000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
Do you own 3. Cars N 3.1.	that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: Lien by Ally Finar	chevrolet Equinox 2016 72000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Do you own 3. Cars. N 3.1.	bwn, lease, or have legathat someone else driven, vans, trucks, tractors of es Make: Model: Year: Approximate mileage: Other information: Lien by Ally Finar own or have more than Make:	chevrolet Equinox 2016 72000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 11714.00 Do not deduct secured class the amount of any secure class the amount of any secure class the amount of any secure	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$

Jeanna .	J, waikei		
First Name	Middle Name	Last Name	

Case number	(if known)			

nate mileage:ormation:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Do not doduct socured els	
5	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		ims or exemptions. Put
5 ————	Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair	
5 ————	•	Current value of the	Current value of the
ormation:	At least one of the debtors and another	entire property?	portion you own?
	_ / 11.0000 0.10 0.110 000000 0.110 0.10110.		
	☐ Check if this is community property (see instructions)	\$	\$
	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Debtor 2 only	Current value of the	Current value of the
nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
-	At least one of the debtors and another		
ormation:	Check if this is community property (see instructions)	\$	\$
	d other recreational vehicles, other vehicles, and access atercraft, fishing vessels, snowmobiles, motorcycle accessor		
	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Debtor 2 only		
ormation:	Debtor 1 and Debtor 2 onlyAt least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	☐ Check if this is community property (see instructions)	\$	\$
ave more than one list here:		Do not doduct accured als	ima ar ayamatiana Dut
ave more than one, list here:	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	d claims on <i>Schedule D:</i>
	Who has an interest in the property? Check one.	Creditors Who Have Clair	ns Secured by Property.
ave more than one, list here:	Debtor 1 only	Ordanoro vivio riavo olam	Current value of the
		Current value of the	
	☐ Debtor 1 only ☐ Debtor 2 only		portion you own?
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see	Current value of the	portion you own?
		Debtor 2 only	

Last Name

Case number (if known)_

Part 3:	Describe Your Personal and Household Item	1

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
☐ No Kitchenware, Dining Room Table with Chairs, Lamps, Mirrors and Clocks, Living	
Yes. Describe Room Furniture, Recliner, TV, Entertainment Center, Bed, Nightstand, Books,	s 750
	φ
7. Electronics	
collections; electronic devices including cell phones, cameras, media players, games	
□ No TV, Computer	
Yes. Describe	\$ 200
·	7
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	1
No No	
☐ Yes. Describe	\$
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
and kayaks; carpentry tools; musical instruments	1
□ No Bicycle	
Yes. Describe	\$100
10. Firearms	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment	_
No .	
Yes. Describe	\$
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	•
No Wearing Apparel	400
Yes. Describe	\$100
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
gold, silver	1
⊠ No	
Yes. Describe	\$
13. Non-farm animals	
Examples: Dogs, cats, birds, horses	i
™ No	
☐ Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	ľ
X No	
Yes. Give specific	
information	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$ <u>1150</u>
for Part 3. Write that number here	

First Name Middle Name Last Name

Case number (if known)_

Dart	1 ·	Describe	\mathbf{v}

Describe Your Financial Assets

Do you own or have any le	egal or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you h	ave in your wallet, in your hom	ne, in a safe deposit box, and on hand when you fi	le your petition	
➤ No ☐ Yes			Cash:	\$
and other sin		nts; certificates of deposit; shares in credit unions ultiple accounts with the same institution, list each		
☐ No ☑ Yes		Institution name:		
	17.1. Checking account: 17.2. Checking account:	M&T Bank		\$35.00 \$
	17.3. Savings account: 17.4. Savings account:	M&T Bank		\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:17.8. Other financial account:			\$ \$
	17.9. Other financial account:			\$
No Yes	Institution or issuer name:	erage firms, money market accounts		\$ \$ \$
an LLC, partnership, an		rated and unincorporated businesses, includir	% of ownership:	
☐ Yes. Give specific information about them			0% % 0% %	\$ \$
			<u>078</u> %	\$

Debtor 1	Deanna J,	Walker

First Name Middle Name Last Name

Case number (if known)	
------------------------	--

page 6

Pension pi IRA: Retiremen Keogh: Additional	, Keogh, 401(k), 403(b), thrif ccount: Institution name: similar plan: 401 K lan:	t savings accounts, or othe	er pension or profit-sharin	\$ \$ g plans \$	1000
them	, Keogh, 401(k), 403(b), thrif ccount: Institution name: similar plan: 401 K lan:	t savings accounts, or othe	er pension or profit-sharin	\$ \$ g plans \$	
Examples: Interests in IRA, ERISA No Yes. List each account separately. Type of a 401(k) or s Pension pi IRA: Retirement Keogh: Additional	, Keogh, 401(k), 403(b), thrif ccount: Institution name: similar plan: 401 K lan:	t savings accounts, or othe	er pension or profit-sharing	\$ \$ g plans \$	
Examples: Interests in IRA, ERISA No Yes. List each account separately. Type of a 401(k) or s Pension pi IRA: Retirement Keogh: Additional	, Keogh, 401(k), 403(b), thrif ccount: Institution name: similar plan: 401 K lan:	t savings accounts, or othe	er pension or profit-sharin	g plans \$	
Examples: Interests in IRA, ERISA No Yes. List each account separately. Type of a 401(k) or s Pension pi IRA: Retirement Keogh: Additional	, Keogh, 401(k), 403(b), thrif ccount: Institution name: similar plan: 401 K lan: ut account:			\$	1000
account separately. Type of a 401(k) or s Pension pi IRA: Retiremen Keogh: Additional	similar plan: dan: ut account:				1000
Pension pi IRA: Retiremen Keogh: Additional	lan:				1000
Pension pi IRA: Retiremen Keogh: Additional	lan:			•	
IRA: Retiremen Keogh: Additional	account:				
Retiremen Keogh: Additional	at account:			Φ.	
Keogh: Additional					
Additional					
Additional.	account:				
Additional	account:			\$	
Examples: Agreements with landlo companies, or others	rds, prepaid rent, public utilit	es (electric, gas, water), te	elecommunications		
No No	la attenta a a casa a calla	45 4 4 L			
Yes	Institution name or in	dividual:			
Gas:				\$	
Heating oi					
_	eposit on rental unit:			\$	
Prepaid re				\$	
Telephone				 \$	
Water:	·				
Rented fur	miture:			 \$	
Other:				 \$	
Other.				 \$	
	c payment of money to you,	either for life or for a numb	er of years)		
X No					
™ No	me and description:				
	me and description:			\$	

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified state tuition program.	
X No		
Yes Institution name and description. Separately file the record	de of any interests 11 II S C & 521(c)	1.
institution hame and description. Deparatory me the record	23 of any interests. 11 0.0.0. § 321(6)	•
		\$
		\$
		\$
25. Trusts, equitable or future interests in property (other than anything listed in line 1) exercisable for your benefit	, and rights or powers	
№ No		
Yes. Give specific		1
information about them		\$
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property		
Examples: Internet domain names, websites, proceeds from royalties and licensing agree	ments	
No [7
Yes. Give specific		
information about them		\$
		<u>.</u>
27. Licenses, franchises, and other general intangibles		
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses	cerises, professional licerises	7
No III		
Yes. Give specific information about them		¢
		\$
Money or property owed to you?		Current value of the
money or property ends to your		portion you own?
		Do not deduct secured claims or exemptions.
20 Tay refunds awad to you		
28. Tax refunds owed to you No		
Yes. Give specific information 2024 Estimated Refund (Pro Rated)	1	276
about them, including whether	Federal:	376
you already filed the returns	State: S	170
and the tax years	Local:	\$
•		
29. Family support		
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, d	livorce settlement, property settlemer	nt
X No		
☐ Yes. Give specific information	Alimanu.	c
	Alimony:	Φ
	Maintenance:	\$ \$
	Support:	\$ \$
	Divorce settlement:	φ ¢
	Property settlement:	Φ
30. Other amounts someone owes you	ation many consultant account of	
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vaca Social Security benefits; unpaid loans you made to someone else	ation pay, workers' compensation,	
□ No Child Support Judgment Erie County	Family Court	
Yes. Give specific information	•	,
·		\$0
ľ		ľ

Debtor 1	Deanna J, Walker			Case number (if known)
	First Name	Middle Name	Last Name	

3′	•	ce; health savings account (HSA); credit, homeowner's, or renter's insurance	
	No Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
				\$
32	property because someone has died.		nce policy, or are currently entitled to receive	\neg
	⋈ No			
	☐ Yes. Give specific information			\$
33	Claims against third parties, whether or Examples: Accidents, employment dispute T			\neg
	X No			
	Yes. Describe each claim			\$
34	ا Other contingent and unliquidated claim!	s of every nature, including co	ounterclaims of the debtor and rights	
	to set off claims No			
	☐ Yes. Describe each claim			
				\$
	_			
35	5. Any financial assets you did not already	list		\neg
	No Yes. Give specific information			
	Tes. Give specific information			\$
36	L 3. Add the dollar value of all of your entrie for Part 4. Write that number here		tries for pages you have attached	\$8243
P	art 5: Describe Any Business-	Related Property You Ov	wn or Have an Interest In. List any r	real estate in Part 1
	<u> </u>	. , ,		
37	7. Do you own or have any legal or equitable No. Go to Part 6.	le interest in any business-rela	ated property?	
	Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
3	8. Accounts receivable <u>or commissions yo</u>	ou already earned		7
	™ No			
	☐ Yes. Describe			r.
_				
3	9. Office equipment, furnishings, and sup Examples: Business-related computers, software		hines, rugs, telephones, desks, chairs, electronic device:	S
	⋈ No			7
	☐ Yes. Describe			\$

Debtor 1	Deanna J, Walker

Jeanna J	i, vvaikei		
First March	MC Lille Microsco	Last Massa	

Case number	if known)

40. Machinery, fixtures, ec	uipment, supplies you use in business, and tools of your trade		
No Yes. Describe			\$
41. Inventory No Yes. Describe			\$
42. Interests in partnershi	ps or joint ventures		
X No			
☐ Yes. Describe	Name of entity:	% of ownership:	o.
			\$ \$
		%	\$
™ No	g lists, or other compilations		
	nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
No Yes. Descr Yes. Descr No No	ibe		\$
	property you did not already list		
☑ No☑ Yes. Give specific information			\$
			\$
			\$
			\$
			\$
			\$
	f-all of your entries from Part 5, including any entries for pages you have atta umber here		\$0
	y Farm- and Commercial Fishing-Related Property You Own or Hav have an interest in farmland, list it in Part 1.	ve an Interest In.	
46. Do you own or have ar No. Go to Part 7. Yes. Go to line 47.	ny legal or equitable interest in any farm- or commercial fishing-related prop	erty?	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm animals	within the second field		
Examples: Livestock, po	Duitry, rarm-raised fish		
Yes			
			\$

Last Name

48. Crops—either growing or harvested	
No .	
Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
¼ No	
	\$
50. Farm and fishing supplies, chemicals, and feed	
XX No	
☐ Yes	\$
51. Any farm- and commercial fishing-related property you did not already list	Ψ
X No	
☐ Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached	0
for Part 6. Write that number here	\$
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?	
Examples: Season tickets, country club membership	
No Yes. Give specific	\$
information	\$
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$0
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	\$
56. Part 2: Total vehicles, line 5 \$	
57. Part 3: Total personal and household items, line 15 \$	
58. Part 4: Total financial assets, line 36 \$	
59. Part 5: Total business-related property, line 45 \$0	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54	
62. Total personal property. Add lines 56 through 61	+ \$12030.00
63. Total of all property on Schedule A/B. Add line 55 + line 62.	\$12030.00

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim	as Exempt		
	Which set of exemptions are you claiming? You are claiming state and federal nonbank You are claiming federal exemptions. 11 U For any property you list on Schedule A/B th	cruptcy exemptions. 11 l S.C. § 522(b)(2)	J.S.C. § 522(b)(3)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Chevrolet Line from Schedule A/B: 3.1	\$ <u>2637.00</u>	\$\frac{2637.00}{100\% of fair market value, up to any applicable statutory limit	NY D&C 282(1)
	Brief description: Kitchenware, Dining Room Schedule A/B:	\$750.00	★ \$ 750.00 100% of fair market value, up to any applicable statutory limit	CPLR 5205(a)(5)
	Brief description: TV, Computer Line from Schedule A/B: 7	\$200.00	■ \$ 200.00 ■ 100% of fair market value, up to any applicable statutory limit	CPLR 5205(a)(5)
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3 to No Yes. Did you acquire the property covered to No Yes	years after that for cases	,	i.)

Case number (if known)_____

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from 9 Schedule A/B:	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	CPLR 5205(a)(9)
Brief description: Wearing Apparel Line from Schedule A/B: 11	\$100.00	\$100.00_ 100% of fair market value, up to any applicable statutory limit	CPLR 5205(a)(5)
Brief description: M&T Bank Line from Schedule A/B: 17	\$2.00	\$ 250.00 line 100% of fair market value, up to any applicable statutory limit	CPLR 5205(a)(9)
Brief M&T Bank description: Line from 17 Schedule A/B:	\$35.00	\$250.00 100% of fair market value, up to any applicable statutory limit	CPLR 5205(a)(9)
Brief description: 401 K Line from Schedule A/B: 21	\$1000.00	\$ 100% of fair market value, up to any applicable statutory limit	CPLR 5205(c)
Brief description: 2024 Estimated Refund Line from Schedule A/B: 28	\$546.00	\$ 100% of fair market value, up to any applicable statutory limit	CPLR 5205(a)(9)
Brief description: Line from Schedule A/B: Child Support Judgment 30	\$ 6660.00	\$ 6660.00 line 100% of fair market value, up to any applicable statutory limit	NY D&C 282(2)
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	

Debtor 1	Deanna J, Wa	alker		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	the: Western New Yo	ork	
Case number				

☐ Check if this is an amended filing

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any	creditors I	have claims	secured	by your	property?
----	--------	-------------	-------------	---------	---------	-----------

- DNo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

for each claim. If more than one creditor ha	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Ally Financial	Describe the property that secures the claim:	\$ 9077.00	s 11714.00 s	\$ 0.00
Creditor's Name	Chevrolet			·
200 Renaissance Ctr	LienRank = 1			
Number Street	LICHNAIN - 1			
Detroit MI 48243	As of the date you file, the claim is: Check all that apply. Contingent			
City State ZIP Code	☑ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	✓ An agreement you made (such as mortgage or secured car loan) ✓ Statutory lien (such as tax lien, mechanic's lien)			
_ ′	Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)			
Check if this claim relates to a		-		
community debt Date debt was incurred 1/22/2020	Last 4 digits of account number			
	-	\$	\$	\$
Date debt was incurred 1/22/2020	Last 4 digits of account number	\$	\$	\$
Date debt was incurred 1/22/2020 Creditor's Name	-	\$	\$:	\$
Date debt was incurred 1/22/2020	Describe the property that secures the claim:		\$:	\$
Date debt was incurred 1/22/2020 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply.		\$;	\$
Date debt was incurred 1/22/2020 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent		\$:	\$
Date debt was incurred 1/22/2020 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		\$	\$
Date debt was incurred 1/22/2020 Creditor's Name Number Street City State ZIP Code	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		\$	\$
Date debt was incurred 1/22/2020 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one.	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		\$	\$
Date debt was incurred 1/22/2020 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one.	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)		\$	\$
Date debt was incurred 1/22/2020 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)		\$	\$
Date debt was incurred 1/22/2020 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		\$	\$
Date debt was incurred 1/22/2020 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$	\$
Date debt was incurred 1/22/2020 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		\$	\$

Debtor 1

Deanna J, Walker
First Name Middle Name Last Name

Part 1: Additional Page After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.	•		
City State ZIP Code	☐ Contingent ☐ Unliquidated			
,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
_	Other (including a right to offset)	-		
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	•			
	As of the date you file, the claim is: Check all that apply.			
	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	'			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the data varifies the element of Charles II that are he			
	As of the date you file, the claim is: Check all that apply. Gontingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Check if this claim relates to a community debt	— Other (including a right to onset)	-		
Date debt was incurred	Last 4 digits of account number		_	
Add the dollar value of your entrie	s in Column A on this page. Write that number here:	\$		
	, add the dollar value totals from all pages. CLB Doc 1 Filed 06/24/24 Ente	\$ed 06/24/24	12.01.33	

Debtor	1	

Deanna J, Walker
First Name Middle Name Last Name

Case number	f known)

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РΆ	<i>,</i> .

List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

De	notinea ioi	any debis in Fait 1, do i	not fill out of Sublill	uns page.	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
- 1	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	

Fill in this information to identify your case:				
Debtor 1	Deanna J, Wa	alker		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	r the: Western New York		
United States Bankruptcy Court for the: Western New York				
Case number				
(If known)				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Do any creditors have priority unsecured claims No. Go to Part 2.	against you?			
Yes.				
List all of your priority unsecured claims. If a cree each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the claims fill out the Continuation Page of F	editor has more than one priority unsecured claim, list the claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's neart 1. If more than one creditor holds a particular claim	at claim here ar ame. If you have	nd show both e more than to	priority and wo priority
(For an explanation of each type of claim, see the in	structions for this form in the instruction booklet.)			
		Total claim	Priority amount	Nonprior amount
7			amount	amount
	Last 4 digits of account number	\$	_ \$	_ \$
Priority Creditor's Name				
	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply	' .		
City State ZIP Code	☐ Contingent			
	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only				
Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were			
Is the claim subject to offset?	intoxicated			
□ No	Other. Specify			
Yes				
	Last 4 digits of account number	¢	•	¢
Priority Creditor's Name	When was the debt incurred?	Ψ	_ Ψ	Ψ
	when was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply	'.		
	☐ Contingent			
City State ZIP Code	Unliquidated			
•	☐ Disputed			
Who incurred the debt? Check one. Debtor 1 only				
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	■ Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	☐ Claims for death or personal injury while you were intoxicated			

О.		1
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List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority unsec ☐ No. You have nothing to report in this p ☐ Yes						
	List all of your nonpriority unsecured clands nonpriority unsecured claim, list the creditorincluded in Part 1. If more than one creditorial claims fill out the Continuation Page of Part	or separa or holds a	tely for each claim.	For each claim listed, identify wha	at type of claim it is. Do not	list claims alread	
						Total claim	
4.1	1				0 4 4 4	Total claim	
7.1	Amazon Nonpriority Creditor's Name			Last 4 digits of account number	3 1 1 1	_{\$} 1260.	48
	410 Terry Ave. North			When was the debt incurred?	2/2022		
	Number Street						
		VA	98109		• • • • • • •		
	City Sta	ate	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	Who incurred the debt? Check one.			Contingent			
	Debtor 1 only			☐ Unliquidated☐ Disputed☐			
	Debtor 2 only			Disputed			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	☐ At least one of the debtors and another			☐ Student loans			
	☐ Check if this claim is for a community	v debt		Obligations arising out of a separate			
	Is the claim subject to offset?	,		that you did not report as priority			
	No			Debts to pension or profit-sharingOther. Specify		•	
	☐ Yes			_ calci. opedity			
	1.					s 361.	92
4.2	Amazon			Last 4 digits of account number When was the debt incurred?		\$361.	<u> </u>
	Nonpriority Creditor's Name			when was the dept incurred?			
	410 Terry Ave. North Number Street						
	Seattle V	VA	98109	As of the date you file, the claim	is: Check all that apply.		
	City Sta	ate	ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			☐ Student loans			
				Obligations arising out of a separate	ation agreement or divorce		
	☐ Check if this claim is for a community	y debt		that you did not report as priority	claims		
	Is the claim subject to offset?			Debts to pension or profit-sharingOther. Specify	, ,	3	
	Ma No □ Yes			Other. Specify			
4.3	CBE Group Nonpriority Creditor's Name			Last 4 digits of account number	_2 _1 _3 _9	s 183.	00
	Po Box 900			When was the debt incurred?	102022	·	
	Number Street						
	Waterloo I.	Α	50704	As of the date you file, the claim	is: Chock all that apply		
	City Sta	ate	ZIP Code	_	is. Oneck all that apply.		
	Who incurred the debt? Check one.			☐ Contingent☐ Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			☐ Student loans			
	Check if this claim is for a community	y debt		Obligations arising out of a separ			
	Is the claim subject to offset?			that you did not report as priority Debts to pension or profit-sharing			
	No No			Other. Specify	• •	•	
	☐ Yes						

Case 1-24-10691-CLB, Doc 1, Filed 06/24/24, Entered 06/24/24 12:01:33, Description:/ Maidin Down กลุง เคลือด 28 คริง

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	er listing any entries on this page, number then	n beginning with	4.4, followed by 4.5, and so forth.	To	otal claim
4.4	Capital One Bank Nonpriority Creditor's Name		Last 4 digits of account number 5 1 0 5	\$	496.14
	10700 Capital Way		When was the debt incurred?		
	Number Street Glen Allen VA	23060	As of the date you file, the claim is: Check all that apply.		
	City State Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		☐ Student loans		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?		 Debts to pension or profit-sharing plans, and other similar debts Other. Specify 		
	Mo ☐ Yes		Other. Specify		
4.5	Capital One Bank, USA N.A.		Last 4 digits of account number 8 5 8 4	\$	735.21
	Nonpriority Creditor's Name 10700 Capital Way		When was the debt incurred? 8584		
	Number Street Glen Allen VA	23060	As of the date you file, the claim is: Check all that apply.		
	City State	ZIP Code	☐ Contingent		
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes		 Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 		
4.6	Capital One Bank, USA N.A.		Last 4 digits of account number 1 7 2 9	\$	2268.32
	Nonpriority Creditor's Name PO Box 30281		When was the debt incurred?		
	Number Street Salt Lake City UT	84130	As of the date you file, the claim is: Check all that apply.		
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed		
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ☑ No ☐ Yes		Other. Specify		

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning	with 4.4, followed by 4.5, and so forth.	Total claim
4.7 Credit One Bank Nonpriority Creditor's Name PO Box 98872 Number Street	When was the debt incurred? 957.74 As of the date you file, the claim is: Check all that apply.	\$ 957.74
Las Vegas City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Dept of Ed/NeInet Nonpriority Creditor's Name POB 82561 Number Street Lincoln NE 68501 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$ 9108.00
Discover Bank Nonpriority Creditor's Name Po Box 30939 Number Street Salt Lake City UT 19850 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 2 0 2 1 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$_2005.42

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

		m beginning with	4.4, followed by 4.5, and so forth.	Total claim
5	JC PENNEY		Last 4 digits of account number 2 0 2 6	\$384.61
	Nonpriority Creditor's Name Credit Service Center PO Box 533		When was the debt incurred?	
	Number Street Dallas, TX	75221	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one.	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only		·	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	
	□ At least one of the debtors and another□ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	Mo No Yes			
5.1	Sam's Club MC/Synchrony Bank		Last 4 digits of account number 9 4 8 7	\$ 952.24
	Nonpriority Creditor's Name		When was the debt incurred?	
	PO Box 960013 Number Street		As of the date you file, the claim is: Check all that apply.	
	Orlando FL City State	32896 ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only		1	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	M No ☐ Yes		Other. Specify	
5.2			Last 4 digits of account number 7 5 9 3	_{\$} 1270.50
	Target Card Services Nonpriority Creditor's Name		40/0045	
	PO Box 965024 Number Street		When was the debt incurred? 12/2015	
	Orlando FL	32896	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another		Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	
	☑ No ☐ Yes			

Deanna J, Walker
First Name Middle Name Last Name

Case number (if known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Resurgent/LVNV Fund	ding		On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			1: 47 ((0) () D D (4 0 1) (1) (1) (1)		
Po Box 30939 Number Street			Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
tunion onoc			Part 2: Creditors with Nonpriority Unsecured Clain		
Salt Lake City	Utah State	84130 ZIP Code	Last 4 digits of account number		
Synchrony Bank/JC P	enneys		On which entry in Part 1 or Part 2 did you list the original creditor?		
POBox 965060			Line <u>5</u> of (<i>Check one</i>): □ Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
Att: Bankruptcy			Claims		
Orlando City	FL State	32897 ZIP Code	Last 4 digits of account number		
Synchrony Bank/JC P	enneys		On which entry in Part 1 or Part 2 did you list the original creditor?		
POBox 965060			Line 5 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
Att: Bankruptcy			Claims		
Orlando	FL	32897	Last 4 digits of account number		
TD Donk Hoo/Torrect	State	ZIP Code	On which automic Pout 4 on Pout 9 did one little automic automic 20		
TD Bank Usa/Target			On which entry in Part 1 or Part 2 did you list the original creditor?		
PO Box 1470			Line <u>5.2</u> of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Minneapolis City	MN State	55440 ZIP Code	Last 4 digits of account number		
JII	State	ZIP Code			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?		
vaine			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			□ Part 2: Creditors with Nonpriority Unsecured		
			Claims		
			Last 4 digits of account number		
City	State	ZIP Code			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?		
vanie			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Dity	State	ZIP Code	Last 4 digits of account number		
,	2.4.0	2340			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?		
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured		
			Claims		
· · · · · · · · · · · · · · · · · · ·	01-1-	7ID 0- 1-	Last 4 digits of account number		
ity	State	ZIP Code	J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

Case number (if known)_____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$0
	6e. Total. Add lines 6a through 6d.	6e.	\$0
			Total claim
Total claims	6f. Student loans	6f.	\$11113.71
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	s0
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$0

Fill in this information to identify your case:						
Debtor	Deanna J, Walker					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse If filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Western New York						
Case number(If known)						

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with whom yo	ou have the contract or I	ease	Sta	ate what the contract or le	ease is for	
2.1								
	Name							
	Number	Street						
	City	State	e ZIP Code					
2.2								
	Name							
	Number	Street						
	City	State	e ZIP Code					
2.3								
	Name							
	Number	Street						
	City	State	e ZIP Code					
2.4								
	Name							
	Number	Street						
	City	State	e ZIP Code					
2.5								
	Name							
	Number	Street						
	City	State						
		Caso 1 24 1060	1 CLB Doc 1	Eilad 06/	24/24	Entared 06/24/2/	4 4 2 . 0 4 . 2 2	

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First Name

Middle Name

Last Name

Case number (if known)_____

	A	dditional Pa	age if You Ha	ve More Contracts or Leases	
	Person o	r company w	rith whom you h	nave the contract or lease	What the contract or lease is for
2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					_
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2					_
	Name 				_
	Number	Street			
	City		State	ZIP Code	
2	Name				_
	Name				
	Number	Street			
	City		State	ZIP Code	

Fill in this information to identify your case:						
Debtor 1	Deanna J, Walker					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Western New York						
Case number(If known)						

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you hav	ve any codebtors	? (If you are filing a joint case, do not	list either spouse a	as a codebtor.)				
	☐ Yes								
2.	2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)								
	🔀 No. Go	to line 3.							
			mer spouse, or legal equivalent live v	vith you at the time?	?				
	☐ No			•					
	☐ Yes	s. In which commu	nity state or territory did you live?		Fill in the name and current address of that person.				
	Nar	me of your spouse, forme	er spouse, or legal equivalent		-				
	Nur	mber Street			-				
	City	/	State	ZIP Code	-				
J.	shown in I Schedule	line 2 again as a c D (Official Form 1 E/F, or Schedule	odebtor only if that person is a gu	arantor or cosigne	or if your spouse is filing with you. List the person er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D,				
	Column 1	: Your codebtor			Column 2: The creditor to whom you owe the debt Check all schedules that apply:				
3.1]				chock an concade that apply.				
3.1	Name				Schedule D, line				
	Name				☐ Schedule E/F, line				
	Number	Street			☐ Schedule G, line				
	City		State	ZIP Code					
3.2									
	Name				Schedule D, line				
					Schedule E/F, line				
	Number	Street			☐ Schedule G, line				
	City		State	ZIP Code					
3.3									
	Name				Schedule D, line				
					Schedule E/F, line				
	Number	Street			☐ Schedule G, line				
	City		State	ZIP Code					
	_	Case 1-24-1	L0691-CLB, Doc 1, F	iled 06/24/24	, Entered 06/24/24 12:01:33,				

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eanna J,	Walker		Case number (if known)
iret Name	Middle Name	Last Name	

	Ad	lditional Page to Li	st More Codebtors		
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
3					Check all schedules that apply:
o	Nama				Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
					_
	City		State	ZIP Code	
3	Name				Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
					_
	City		State	ZIP Code	
3	Name				Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
					_
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
3					— ☐ Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
					·
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	ramber	Cucci			·
	City		State	ZIP Code	
3					— ☐ Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3					Cabadida D. lina
	Name	·			— □ Schedule D, line□ Schedule E/F, line
	Nicostra	Street			Schedule E/F, line
	Number	Street			
	City		State	ZIP Code	

Fill in this information to identify	your case:						
5							
Debtor 1 Deanna J, Walke	Middle Name	Last Name		-			
Debtor 2							
(Spouse, if filing) First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:	western New York	_ District of NY (State)				
Case number(If known)					Check if thi	s is:	
(ii kilowii)					An ame	· ·	
						ement showing postpetition chap	ter 13
Official Form 106I						as of the following date:	
-					MM / DD	/ YYYY	
Schedule I: You	ır Income					12	2/15
Be as complete and accurate as posupplying correct information. If you figure separated and your spouseparate sheet to this form. On the Describe Employm	ou are married and not fili use is not filing with you, top of any additional pag	ing jointly, and yo do not include inf	ur sp orma	ouse is	living with yo out your spou	u, include information about your se. If more space is needed, attacl	spouse.
Fill in your employment information.		Debtor 1				Debtor 2 or non-filing spouse	
If you have more than one job,							
attach a separate page with information about additional	Employment status	Employed				☐ Employed	
employers.		☐ Not employ	ed			☐ Not employed	
Include part-time, seasonal, or self-employed work.		Teacher Assi	etan	t			
Occupation may include student or homemaker, if it applies.	Occupation	Teacher 7433	Starr				
	Employer's name	Buffalo Scho	ol Di	strict			
	Employer's address	004 0:5.11-11					
	Employer o address	801 City Hall Number Street				Number Street	
		5 % 1 10/4	4004				
		Buffalo NY 1	4202 Stat		Code	City State ZIP Co	
	How long amployed the		O.a.	J	0000		
	How long employed the	re? <u>5 years</u>					
Part 2: Give Details About	Monthly Income						
		n. If you have nothi	ng to	report f	or any line, writ	e \$0 in the space. Include your non-	filing
spouse unless you are separated If you or your non-filing spouse had below. If you need more space, a	ave more than one employe		rmati	on for a	I employers for	that person on the lines	
				Fo	Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, saldeductions). If not paid monthly,			2.	\$.	3124.33	\$0.00	
3. Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+ \$0.00	
4 Calculate gross income Add li	no 2 i lino 3		1	¢	3124 33	\$ 0.00	

page 1

Case number (if known)_____

		For	Debtor 1		For Debt	tor 2 or g spouse		
Copy line 4 here	→ 4.	\$	3124.33		\$	0.00		
5. List all payroll deductions:								
5a. Tax, Medicare, and Social Security deductions	5a.	\$	595.83		\$	0.00		
5b. Mandatory contributions for retirement plans	5b.	\$	0.00		\$	0.00		
5c. Voluntary contributions for retirement plans	5c.	\$	112.67		\$	0.00		
5d. Required repayments of retirement fund loans	5d.	\$	0.00		\$	0.00		
5e. Insurance	5e.	\$	56.33		\$	0.00		
5f. Domestic support obligations	5f.	\$	0.00		\$	0.00		
5g. Union dues	5g.	\$	54.17		\$	0.00		
5h. Other deductions. Specify:	5h.	+\$	0.00	4	- \$	0.00		
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	. 6.	\$	0.00		\$	0.00		
		\$ \$	0.00		\$ \$	0.00		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	Φ	0.00		Φ			
8. List all other income regularly received:								
8a. Net income from rental property and from operating a business, profession, or farm								
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$	0.00		
8b. Interest and dividends	8b.	\$	0.00		\$	0.00		
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive		Ψ	0.00		Ψ	0.00		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00		\$	0.00		
8d. Unemployment compensation	8d.	\$	0.00		\$	0.00		
8e. Social Security	8e.	\$	0.00		\$	0.00		
8f. Other government assistance that you regularly receive								
Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce							
Specify:	8f.	\$	0.00		\$	0.00		
8g. Pension or retirement income	8g.	\$	0.00		\$	0.00		
8h. Other monthly income. Specify:	8h.	+\$	0.00		+\$	0.00		
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0		\$	0		
 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 	10.	\$	2305.33	+	\$	0.00	\$	2305.33
11. State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives.			ents, your roc	omma	ites, and	other		
Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable	to pay expe	nses	listed in	Schedule J.		
Specify:						11. 🛨	\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The				•			\$	2305.33
Write that amount on the Summary of Your Assets and Liabilities and Certain	Statist	icai inte	ormation, it it	арріі	es	12.	Ψ——— Combir	
13. Do you expect an increase or decrease within the year after you file this	form?	?						y income
¥ No.☐ Yes. Explain:								
— 100. Explain.								

Case 1-24-10691-CLB, Doc 1, Filed 06/24/24, Entered 06/24/24 12:01:33, Official Form 106l Description: Manuella beautiful bit and the firm Page 39 of 60

Fill in this information to identify your case:			
Doonno I Wolker			
Debtor 1 Deal III a J, Walker First Name Middle Name Last Name	Check if this is:		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	An amended	-	
United States Bankruptcy Court for the: Western New York		t showing postp of the following	petition chapter 13
Case number	MM / DD / YYY		dato.
(If known)	IVIIVI / DD / TTT	ı	
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filir information. If more space is needed, attach another sheet to this form (if known). Answer every question.			-
Part 1: Describe Your Household			
Is this a joint case?			
No. Go to line 2. Yes. Does Debtor 2 live in a separate household?			
□ No			
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Section 106J-2, Expenses for Section 2 must file Official Form 106J-2, Expenses for Section 2 must file Official F	eparate Household of Debtor 2.		
2. Do you have dependents?	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents' names.	Daughter	12	☐ No ☑ Yes
Hallios.			☐ No
			☐ Yes
			☐ No ☐ Yes
			- 100
			□ No □ Yes
			☐ No
			☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you a	re using this form as a supplement i	n a Chanter 13 c	ase to report
expenses as of a date after the bankruptcy is filed. If this is a supplemental applicable date.		_	
Include expenses paid for with non-cash government assistance if you	know the value of		
such assistance and have included it on Schedule I: Your Income (Office	cial Form 106l.)	Your expe	nses
 The rental or home ownership expenses for your residence. Include any rent for the ground or lot. 	first mortgage payments and 4.	\$	1066.00
If not included in line 4:			0.00
4a. Real estate taxes	4a		0.00
4b. Property, homeowner's, or renter's insurance	4b		0.00
4c. Home maintenance, repair, and upkeep expenses	4c		0.00
4d. Homeowner's association or condominium dues	4d	S	0.00

Last Name

			Your ex	rpenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	0.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	100.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	400.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	100.00
).	Personal care products and services	10.	\$	75.00
1.	Medical and dental expenses	11.	\$	50.00
2.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	175.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
4.	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	218.00
	15d. Other insurance. Specify:	15d.	\$	0.00
i.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	379.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
3.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
9.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
Э.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Debtor 1	Deanna .	J, Walker		Case number (if known)
	First Name	Middle Name	Last Name	

21. Ot	her . Sp	ecify:	21.	+\$	0.00
2. C a	lculate	your monthly expenses.			
22	a. Add	lines 4 through 21.	22a.	\$	2663.00
22	b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22	c. Add	ine 22a and 22b. The result is your monthly expenses.	22c.	\$	2663.00
23. Cal	culate	your monthly net income.			2305.33
23a	Сор	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	2303.33
23b	Сор	y your monthly expenses from line 22c above.	23b.	- \$	2663.00
23c.		ract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$	-357.67
For	examp	pect an increase or decrease in your expenses within the year after you file this form? le, do you expect to finish paying for your car loan within the year or do you expect your payment to increase or decrease because of a modification to the terms of your mortgage?			
X	No.				
	Yes.	Explain here:			

Fill in this in	formation to ident	fy your case:		
Debtor 1	Deanna J, Wall			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I Case number (If known)	Sankruptcy Court for th	ne: Western New York		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Did you	u pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?
⊠ No		
☐ Yes	S. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
		Signature (Official Form 119).
Under	penalty of perjury, I declare that I have read the	summary and schedules filed with this declaration and
	ey are true and correct.	
x /s/ [Deanna J, Walker	K
Signatu	ure of Debtor 1	Signature of Debtor 2
Date 6	6/24/2024	Date
	MM / DD / YYYY	MM / DD / YYYY

Fill in this information to identify your case:					
Debtor 1	Deanna J, W	/alker	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court f	or the: Western New York			
Case number (If known)					

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's name: Ally Financial	☐ Surrender the property.	☐ No
Description of Chevrolet	Retain the property and redeem it.	🞽 Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
• • • • • • • • • • • • • • • • • • •	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring doos.	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☐ Retain the property and [explain]:	

Deanna	J, Walker		Case number (If known)
First Name	Middle Name	Last Name	, ,

the information below. Do not list re	e that you listed in Schedule G: Executory Contrac al estate leases. Unexpired leases are leases that a rsonal property lease if the trustee does not assum	re still in effect; the lease period has not yet
Describe your unexpired personal prope	erty leases	Will the lease be assumed?
essor's name:		□ No
escription of leased roperty:		☐ Yes
essor's name:		□ No
escription of leased roperty:		☐ Yes
essor's name:		□ No
escription of leased roperty:		☐ Yes
essor's name:		□ No □ Yes
escription of leased roperty:		Tes Tes
essor's name:		□ No
escription of leased roperty:		☐ Yes
essor's name:		□ No
escription of leased roperty:		☐ Yes
essor's name:		□ No
escription of leased roperty:		☐ Yes
rsonal property that is subject to an u	•	my estate that secures a debt and any
/s/Deanna J, Walker ignature of Debtor 1	Signature of Debtor 2	
Pate 6/24/2024	Date	

Fill in this information to identify your case:							
Debtor 1	Deanna First Name	J,	Walker	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name		Last Name			
United States	Bankruptcy Court for the:	Western New	York				
Case number (If known)							

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current	marital status?								
☐ Married Mot married									
During the last 3 year	ers, have you live	ed anywhere	other th	an where y	ou live now?				
No Yes. List all of the	places you lived	in the last 3 y	ears. D	o not include	e where you live now.				
Debtor 1:		,	Date	s Debtor 1 there	Debtor 2:			Dates Dates Iived th	Debtor 2 nere
					☐ Same as Debtor 1			☐ Same	as Debtor 1
477 Forest	Ave.		From	1/2021	Address			From	Move in
Number Stre	eet		To	12/23	Number Street			To	Move ou
Address 2			-	12/20	Address 2			10	WOVC OC
Buffalo	NY	14213			City	State)		
City	State	ZIP Code			City	State 2	ZIP Code		
					☐ Same as Debtor 1			☐ Same	as Debtor 1
80 Jackson	Terrace		From	6/2017	Address			From	Move in
Number Stre	eet		To	1/2021	Number Street			To	Move ou
Address 2			-	1/2021	Address 2			10	<u>wove ou</u>
Buffalo	NY	14206			City				
City	State	ZIP Code	_		City	State	ZIP Code		

Part 2: Explain the Sources of Your Income

☐ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

✓ No

Did you have any income from employmen fill in the total amount of income you received fyou are filing a joint case and you have inco	I from all jobs and all busing	nesses, including part-tir	ne activities.	ndar years?
☐ No ☑ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions a exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$21442.79	Wages, commissions, bonuses, tipsOperating a business	\$_ Gross Incom
For last calendar year: (January 1 to December 31,2023)	Wages, commissions, bonuses, tips Operating a business	\$38990	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$_Gross Incon
	Wages, commissions,		☐ Wages, commissions,	
nclude income regardless of whether that inc	bonuses, tips Operating a business onis year or the two previousme is taxable. Examples	of other income are alim	bonuses, tips Operating a business nony; child support; Social	Security,
(January 1 to December 31, 2022 YYYYY Indid you receive any other income during the include income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e	bonuses, tips Operating a business is year or the two previous is taxable. Examples ents; pensions; rental income is joint case and you have	ous calendar years? of other income are alimome; interest; dividends; e income that you receive	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once	Security, suits; royalties; and
(January 1 to December 31, 2022 YYYYY Indid you receive any other income during the include income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e	bonuses, tips Operating a business is year or the two previous is taxable. Examples ents; pensions; rental income is joint case and you have	ous calendar years? of other income are alimome; interest; dividends; e income that you receive	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once	Security, suits; royalties; and
(January 1 to December 31, 2022 YYYYY Indid you receive any other income during the include income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e	bonuses, tips Operating a business onis year or the two previous come is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. Do	ous calendar years? of other income are alimome; interest; dividends; e income that you receive	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4.	Security, suits; royalties; and e under Debtor 1. Gross income from each source
id you receive any other income during the clude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each	bonuses, tips Operating a business is year or the two previous ome is taxable. Examples ents; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income	ous calendar years? of other income are alimome; interest; dividends; e income that you receive ont include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	Security, suits; royalties; and e under Debtor 1. Gross income from each source (before deductions a
(January 1 to December 31, 2022 YYYYY Did you receive any other income during the notice income regardless of whether that income memployment, and other public benefit payment pambling and lottery winnings. If you are filing it each source and the gross income from each source and the gross income from each yes. Fill in the details.	bonuses, tips Operating a business inis year or the two previous is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	ous calendar years? of other income are alimome; interest; dividends; e income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions a exclusions)

(January 1 to December 31,2022_)

		Certain Fayin	101113 100	u Made Befo					
ro oitl	hor D	ebtor 1's or Deb	tor 2's dol	ote primarily e	onsumor dobte	.2			
									-
■ No.						bts. Consumer debts ar ousehold purpose."	e defined in 11 U.S	S.C. § 101(8	B) as
		•	•		•	y any creditor a total of	\$6,825* or more?		
		No. Go to line 7.							
		total amoun	t you paid	that creditor. D	o not include pa	\$6,825* or more in one ayments for domestic superits to an attorney for t	pport obligations, s	such as	
	* Sı			-		at for cases filed on or a			
1 Yes	s Deb	otor 1 or Debtor	2 or both	have nrimarily	consumer del	nts			
- 100						y any creditor a total of	\$600 or more?		
					, a.a , oa pa	y any oreaner a tetar er	4000 01 1110101		
		No. Go to line 7.							
	×	Yes. List below e	ach credito	or to whom you	paid a total of	600 or more and the to	tal amount you pai	d that	
						ort obligations, such as y for this bankruptcy ca			
		•							
					Dates of payment	Total amount paid	Amount you sti	ll owe	Was this payment for
		Ally Financia	al		15 month	\$ 379	9 \$	9077	☐ Mortgage
		Creditor's Name				,			Car
		200 Renaiss	ance Ct	<u> </u>					Credit card
		Number Street							
									Loan repayment
		 Detroit	MI	48243					☐ Suppliers or vendo
		Detroit City	MI	48243 ZIP Code					☐ Suppliers or vendo
						\$	\$		☐ Suppliers or vendo
						\$	\$		Suppliers or vendo Other Mortgage
		City Creditor's Name				\$	\$		□ Suppliers or vendo □ Other □ Mortgage □ Car
		City				\$	\$		Suppliers or vendo Other Mortgage Car Credit card
		City Creditor's Name				\$	\$		Suppliers or vendo Other Mortgage Car Credit card Loan repayment
		Creditor's Name Number Street	State	ZIP Code		\$	\$		Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendo
		City Creditor's Name				\$	\$		Suppliers or vendo Other Mortgage Car Credit card
		Creditor's Name Number Street	State	ZIP Code			· ·		Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendo Other
		Creditor's Name Number Street	State	ZIP Code		\$\$	\$		Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other
		Creditor's Name Number Street City Creditor's Name	State	ZIP Code			· ·		Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car
		Creditor's Name Number Street City	State	ZIP Code			· ·		Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card
		Creditor's Name Number Street City Creditor's Name	State	ZIP Code			· ·		Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
		Creditor's Name Number Street City Creditor's Name	State	ZIP Code			· ·		Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Credit card

tor 1		Ο,	Walker			Case number (if known)_	
	First Name	Middle Name	Last Name		-	,-	
Insid corpo agen	<i>ler</i> s include you orations of whic	r relatives; any g h you are an offic for a business y	eneral partners; re cer, director, perso	latives of any n in control, o	general partners; p r owner of 20% or r	artnerships of which more of their voting	who was an insider? h you are a general partner; securities; and any managing domestic support obligations,
X N							
□ Y	es. List all payr	ments to an insid	er.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name				\$	\$	
	Number Street						
	City	Sta	ite ZIP Code				
_					\$	\$	
	Insider's Name				Ψ	. Ψ	
	Number Street						
	City	Sta					
an ir Inclu	in 1 year beforensider? de payments or	e you filed for b	ankruptcy, did yo		Total amount paid	fer any property of Amount you still owe	n account of a debt that benefited Reason for this payment Include creditor's name
an ir Inclu	in 1 year beforensider? de payments or	e you filed for b	ankruptcy, did yo	an insider. Dates of	Total amount	Amount you still	Reason for this payment
an ir Inclu	in 1 year before sider? de payments or No 'es. List all payr	e you filed for b	ankruptcy, did yo	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
an ir Inclu	in 1 year beforensider? de payments or No 'es. List all payr	e you filed for b	ankruptcy, did yo	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
an ir Inclu	in 1 year beforensider? de payments or No 'es. List all payr Insider's Name	e you filed for both the debts guaranted ments that benefit	ankruptcy, did yo	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
an ir Inclu	in 1 year beforensider? de payments or No 'es. List all payr Insider's Name	e you filed for both the debts guaranted ments that benefit	ankruptcy, did yo	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
an ir Inclu	in 1 year beforensider? de payments or No /es. List all payr Insider's Name Number Street	e you filed for both the debts guaranted ments that benefit	ankruptcy, did yo	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

State

ZIP Code

City

Debtor 1

Deanna J, Walker
First Name Middle Name Last Name Case number (if known)_______

hin 1 year before you filed for be all such matters, including person					
I contract disputes.					
Yes. Fill in the details.					
	Nature	e of the case	Court or agency		Status of the case
Case title			Court Name		— Pending
					On appeal
			Number Street		Concluded
Case number					
			City	State ZIP Code	
					П
Case title			Court Name		Pending
					On appeal
			Number Street		Concluded
Case number			City	State ZIP Code	
				510.10	
eck all that apply and fill in the det No. Go to line 11. Yes. Fill in the information below.	ails below.	any or your property	repossessea, torecios	ed, garnished, attache	ed, seized, or levied?
No. Go to line 11.	ails below.	Describe the proper		ed, garnished, attache	
No. Go to line 11.	ails below.				Value of the property
No. Go to line 11.	ails below.				
No. Go to line 11. Yes. Fill in the information below.	ails below.	Describe the proper	rty		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ails below.	Describe the proper	rty		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ails below.	Describe the proper	rty ened repossessed.		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ails below.	Describe the proper	ened repossessed. foreclosed.		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ails below.	Explain what happe Property was Property was Property was	ened repossessed. foreclosed.	Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ails below.	Explain what happe Property was Property was Property was	rty ened repossessed. foreclosed. garnished. attached, seized, or levice	Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ails below.	Explain what happe Property was Property was Property was Property was Property was	rty ened repossessed. foreclosed. garnished. attached, seized, or levice	Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta	ails below.	Explain what happe Property was Property was Property was Property was Property was	rty ened repossessed. foreclosed. garnished. attached, seized, or levice	Date	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ails below.	Explain what happe Property was Property was Property was Property was Property was	rty ened repossessed. foreclosed. garnished. attached, seized, or levice	Date	Value of the property \$ Value of the proper
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No. Go to line 11. Yes. Fill in the information below. Creditor's Name City Sta	ails below.	Explain what happe Property was Property was Property was Property was Property was Explain what happe	rty ened repossessed. foreclosed. garnished. attached, seized, or levierty	Date	Value of the property \$ Value of the proper
No. Go to line 11. Yes. Fill in the information below. Creditor's Name City Sta	ails below.	Explain what happe Property was Property was Property was Property was Property was Explain what happe Explain what happe	repossessed. foreclosed. garnished. attached, seized, or levie rty ened repossessed.	Date	Value of the property \$ Value of the proper
No. Go to line 11. Yes. Fill in the information below. Creditor's Name City Sta	ails below.	Explain what happe Property was Property was Property was Property was Property was Explain what happe	rty ened repossessed. foreclosed. garnished. attached, seized, or levierty ened repossessed. foreclosed.	Date	Value of the property \$ Value of the proper

ounts or refuse to make a payment beca	tcy, did any creditor, including a bank or financial inst ause vou owed a debt?	itution, set off any an	nounts from you
No	ause you owed a dest.		
Yes. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
		was taken	7
Creditor's Name			
Number Street			\$
Namber Check			
City State ZIP Code	Last 4 digits of account number: XXXX		
			
nin 1 year before you filed for bankrupto	cy, was any of your property in the possession of an as	ssignee for the benefi	it of
ditors, a court-appointed receiver, a cus		· ·	
No			
Yes			
List Certain Gifts and Contribut	tions		
List Certain Girts and Continbut	LIOIS		
	cy, did you give any gifts with a total value of more that	an \$600 per person?	
No			
Yes. Fill in the details for each gift.			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Describe the gifts		Value
per person	Describe the gifts		Value
per person	Describe the gifts		Value \$
per person	Describe the gifts		Value \$\$
per person Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
per person Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
Person to Whom You Gave the Gift Number Street	Describe the gifts		Value \$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts		\text{Value} \$
Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts		Value \$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts Describe the gifts	Dates you gave	Value \$ Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		the gifts	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		Dates you gave	\$\$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$\$ Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$\$ Value
Person to Whom You Gave the Gift Number Street		Dates you gave	\$\$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$\$ Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	\$\$ Value

Case number (if known)_

Deanna

Debtor 1

Walker

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy
Case 1-24-10691-CLB, Doc 1, Filed 06/24/24, Entered 06/24/24 12:01:33,
Description: Main Document, Page 51 of 60

No	no delibiration		
Yes. Fill in the details for each gift or co		Data you	Value
that total more than \$600	Describe what you contributed	Date you contributed	value
Charity's Name	_		\$
	_		\$
Number Ctreet	_		
Number Street			
City State ZIP Code	_		
6: List Certain Losses			
No			
No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property
No Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance has paid. List pending insurance	· ·	
No Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance has paid. List pending insurance	· ·	
No Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	· ·	lost
No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Tracthin 1 year before you filed for bankro	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or trar	loss	lost
No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Trathin 1 year before you filed for bankruu consulted about seeking bankrupto	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost
No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Tracthin 1 year before you filed for bankruut consulted about seeking bankrupto blude any attorneys, bankruptcy petition No	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or trary or preparing a bankruptcy petition?	loss	lost
Yes. Fill in the details. Describe the property you lost and how the loss occurred The List Certain Payments or Tracthin 1 year before you filed for bankrupt consulted about seeking bankrupto lude any attorneys, bankruptcy petition	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or trar y or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in your preparers.	loss	\$to anyone
No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Traction 1 year before you filed for bankrupto clude any attorneys, bankruptcy petition No Yes. Fill in the details. Mark Lewis	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or trary or preparing a bankruptcy petition?	nsfer any property our bankruptcy. Date payment or transfer was	\$to anyone
No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Tract thin 1 year before you filed for bankrut consulted about seeking bankruptce dude any attorneys, bankruptcy petition No Yes. Fill in the details. Mark Lewis Person Who Was Paid	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or trar y or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in your preparers.	nsfer any property our bankruptcy. Date payment or	lost
No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Traction 1 year before you filed for bankrupto clude any attorneys, bankruptcy petition No Yes. Fill in the details. Mark Lewis	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or trar y or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in your behalf pay or trar your preparers.	nsfer any property our bankruptcy. Date payment or transfer was	to anyone Amount of paym
No Yes. Fill in the details. Describe the property you lost and how the loss occurred T: List Certain Payments or Tract thin 1 year before you filed for bankruut consulted about seeking bankruptoude any attorneys, bankruptcy petition No Yes. Fill in the details. Mark Lewis Person Who Was Paid 4550 Harris Hiill rd	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or trar y or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in your behalf pay or trar your preparers.	nsfer any property our bankruptcy. Date payment or transfer was made	to anyone Amount of paym

Case number (if known)_

Walker

Deanna

Debtor 1

Debtor 1	Deanna	J,	Walker	Case number (if known)
	First Name	Middle Name	Last Name	

Person Who Was Paid	Description and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
				¢
Number Street				Ψ
				\$
City State ZIP Code				
Email or website address	-			
Person Who Made the Payment, if Not You				
omised to help you deal with your credity not include any payment or transfer that you		unors :		
	Description and value of any property t	ransferred	Date payment or transfer was	Amount of paymo
Person Who Was Paid			made	
Number Street				\$
				\$
City State ZIP Code				
nsferred in the ordinary course of your I clude both outright transfers and transfers m not include gifts and transfers that you have	nade as security (such as the granting c	of a security interest or m	ortgage on your pro	perty).
No Yes. Fill in the details.	Description and value of property	Describe any property	or payments received	I Date transfer
Yes. Fill in the details.	Description and value of property transferred	Describe any property or debts paid in exchar		Date transfer was made
Yes. Fill in the details. Person Who Received Transfer				
Yes. Fill in the details. Person Who Received Transfer				
Yes. Fill in the details. Person Who Received Transfer Number Street				
Person Who Received Transfer Number Street City State ZIP Code				
Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you				

Description: Main Document, Page 53 of 60

	Deanna First Name	J, Middle Name	Walker Last Name	_	Case number (if kno	wn)	
	beneficiary?	-	bankruptcy, did you transfer called asset-protection devices		to a self-settled trus	t or similar device of w	hich you
	es. Fill in the de	tails.					
			Description and value	e of the propert	y transferred		Date transfer was made
Na	ame of trust						
_							
8: /:•bi			counts, Instruments, Saf	-			hanafit
roke I N	de checking, s erage houses,	pension funds, o	? market, or other financial acc cooperatives, associations, a			res in banks, credit un	ions,
			Last 4 digits of accou	unt number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance bet
Ī	Name of Financial I	nstitution	xxxx		☐ Checking		\$
ī	Number Street				☐ Savings ☐ Money market		
-	City	State ZIP (Code		☐ Brokerage		
	City	State ZIP (□ Other		
	City Name of Financial I		Code XXXX		Other		\$
i	-				Other Checking Savings Money market		\$
i	Name of Financial I				Other		\$
Do yo secui	Name of Financial In Number Street City Du now have, or rities, cash, or lo	state ZIP or did you have v	XXXXCode within 1 year before you filed	 for bankrupt	Other Checking Savings Money market Brokerage Other	box or other depositor	•
Do yo secui	Name of Financial In Number Street City Du now have, or rities, cash, or	state ZIP or did you have v	XXXXCode within 1 year before you filed		Other Checking Savings Money market Brokerage Other		

ZIP Code

State

Name

City

Number Street

State

ZIP Code

Name of Financial Institution

Number Street

City

page 9

or 1	Deanna	Ο,	Walker	Case nu		
	First Name	Middle Name	Last Name		,	
		erty in a storage	unit or place other than your home	within 1 year be	fore you filed for bankrupto	cy?
A No	-					
Ye	es. Fill in the deta	ails.				
			Who else has or had access to	it? D	escribe the contents	Do you st have it?
						navo it:
						☐ No
	Name of Storage Faci	lity	Name			☐ Yes
	Number Street		Number Street			
			City State ZIP Code			
	City	State ZIP Co	de			
rt 9:	Identify P	roperty You H	lold or Control for Someone Els	se		
Do w	ou hold or contr	ol any proporty t	that someone else owns? Include a	ny proporty vou l	harrawad from ara staring	for
-	old in trust for so		nat someone else owns: include a	ily property your	borrowed from, are storing	101,
Z N		micone.				
	es. Fill in the de	tails.				
			Where is the property?	D	escribe the property	Value
			Where is the property.		escribe the property	Value
						\$
	Owner's Name					
			Number Street			
	Owner's Name Number Street		Number Street			
			Number Street			
	Number Street		City State	ZIP Code		
		State ZIP Co	City State	ZIP Code		
	Number Street		City State	ZIP Code		
rt 10	Number Street City Give Deta	ails About Envi	City State	ZIP Code		
rt 10	Number Street City City Give Deta	ails About Envi	City State ironmental Information g definitions apply:			
rt 10 the	Number Street City Give Deta purpose of Part	alls About Envi 10, the following leans any federal	city State ironmental Information definitions apply: I, state, or local statute or regulatio	on concerning po		
rt 10 the Envir	Number Street City City City Direct Deta purpose of Part fronmental law mandous or toxic su	alls About Envi 10, the following leans any federal ubstances, waste	ironmental Information g definitions apply: I, state, or local statute or regulatioes, or material into the air, land, so	on concerning po	groundwater, or other med	
rt 10 the ∣ <i>Envi</i> l haza inclu	Number Street City City Give Deta purpose of Part fronmental law m irdous or toxic si ding statutes or	nils About Envi 10, the following leans any federal lubstances, waste regulations con	City State ironmental Information g definitions apply: I, state, or local statute or regulatio es, or material into the air, land, so trolling the cleanup of these substa	on concerning poil, surface water, ances, wastes, or	groundwater, or other med material.	lium,
the Envir haza inclu	City City Give Deta purpose of Part fronmental law m irdous or toxic si iding statutes or means any locati	nils About Envi 10, the following leans any federal lubstances, waste regulations con- ion, facility, or pi	ironmental Information g definitions apply: I, state, or local statute or regulatio es, or material into the air, land, so trolling the cleanup of these substa	on concerning poil, surface water, ances, wastes, or	groundwater, or other med material.	lium,
the Envir haza inclu Site utiliz	City	ails About Envi 10, the following neans any federal ubstances, waste regulations con- ion, facility, or pu wn, operate, or u	city State ironmental Information g definitions apply: I, state, or local statute or regulatio es, or material into the air, land, so trolling the cleanup of these substa- roperty as defined under any environtilize it, including disposal sites.	on concerning po il, surface water, ances, wastes, or onmental law, wh	groundwater, or other med material. ether you now own, operat	lium, te, or
the Envir haza inclu Site utiliz	City City Give Deta purpose of Part ronmental law m rdous or toxic so rding statutes or means any locati te it or used to ov ardous material m	ails About Envi	city State ironmental Information g definitions apply: I, state, or local statute or regulatio es, or material into the air, land, so itrolling the cleanup of these substate roperty as defined under any enviroutilize it, including disposal sites. an environmental law defines as a legal	on concerning po il, surface water, ances, wastes, or onmental law, wh	groundwater, or other med material. ether you now own, operat	lium, te, or
the Environmental haza inclu Site utiliz	City City Give Deta purpose of Part ronmental law m rdous or toxic so rding statutes or means any locati te it or used to ov ardous material m	ails About Envi	city State ironmental Information g definitions apply: I, state, or local statute or regulatio es, or material into the air, land, so trolling the cleanup of these substa- roperty as defined under any environtilize it, including disposal sites.	on concerning po il, surface water, ances, wastes, or onmental law, wh	groundwater, or other med material. ether you now own, operat	lium, te, or
the Environment	City City City Give Deta purpose of Part fronmental law m ardous or toxic si ding statutes or means any locati te it or used to over ardous material in stance, hazardou	ails About Envi	city State ironmental Information g definitions apply: I, state, or local statute or regulatio es, or material into the air, land, so itrolling the cleanup of these substate roperty as defined under any enviroutilize it, including disposal sites. an environmental law defines as a legal	on concerning poil, surface water, ances, wastes, on the commental law, when the control waste.	groundwater, or other med material. nether you now own, operat , hazardous substance, tox	lium, te, or
rt 10 the Envir	City City City Give Deta purpose of Part fronmental law m ardous or toxic so adding statutes or means any locati te it or used to over ardous material in stance, hazardou all notices, release	ails About Envi	ronmental Information I definitions apply: I, state, or local statute or regulation es, or material into the air, land, so strolling the cleanup of these substatute roperty as defined under any envirous utilize it, including disposal sites. In environmental law defines as a letant, contaminant, or similar term. Idings that you know about, regardle	on concerning poil, surface water, ances, wastes, or when they	groundwater, or other med material. nether you now own, operat , hazardous substance, tox occurred.	tium, te, or tic
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the Environment of the State of	City City City City City Cive Deta purpose of Part of the city of the ci	alls About Envi	ronmental Information g definitions apply: Il, state, or local statute or regulation es, or material into the air, land, so strolling the cleanup of these substates roperty as defined under any enviroutilize it, including disposal sites. an environmental law defines as a lettant, contaminant, or similar term. dings that you know about, regardle ou that you may be liable or potenti	on concerning poil, surface water, ances, wastes, on mental law, when azardous waste	groundwater, or other med material. The material mether you now own, operate, hazardous substance, tox occurred. The material material mether was a substance of the material method with the material method with the material material method with the method with the material method with the material method with the	tium, te, or tic nmental law?
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anna First Name

Walker

Case number (if known)_

No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street	_	
	City State ZIP Code	_	
City State ZIP Cod	ele ele		
ve you been a narty in any judicial o	or administrative proceeding under a	ny environmental law? Include settlemen	ts and orders
No	administrative proceduring under a	ny china dia na manada da	
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
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		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Business Name	-	Do not include Social Security number of Trin.
			EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
		-	
	City State ZIP Code	-	From To
	hin 2 years before you filed for bankru itutions, creditors, or other parties.	ptcy, did you give a financial statement to a	nyone about your business? Include all financial
ď	No Yes. Fill in the details below.		
		Date issued	
	Name	MM / DD / YYYY	
	Number Street	-	
		_	
	City State ZIP Code	-	
. 1	2. Cian Bolow		
	2: Sign Below		
an in	swers are true and correct. I understa		and I declare under penalty of perjury that the groperty, or obtaining money or property by fraument for up to 20 years, or both.
•	State and a Malling	*	
	/s/Deanna J, Walker Signature of Debtor 1	Signature of Debtor 2	
	oignature of Debtor 1	Signature of Deptor 2	
	Date 6/24/2024	Date	
Di	d you attach additional pages to Your	Statement of Financial Affairs for Individua	ls Filing for Bankruptcy (Official Form 107)?
X	No		

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy
Case 1-24-10691-CLB, Doc 1, Filed 06/24/24, Entered 06/24/24 12:01:33,
Description: Main Document, Page 57 of 60

☐ Yes. Name of person_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

United States Bankruptcy Court District of Western New York

In re Debtor(s)	eanna J, walker		Case No. Chapter		7	
Amei	nded		1	7		
_	SURE OF COMPENSATION	ON OF ATTORNEY FO	R DEBT	OR(S)		
above-nar bankruptc	nt to 11 U.S.C. § 329(a) and I med debtor and that compensary, or agreed to be paid to me, ation of or in connection with	ntion paid to me within on for services rendered or t	ne year bef to be rend	ore the fill	ing of the petiti	on in
Prior to th Balance D		ve received	\$ \$ \$	1000. 1000. 0.00		
2. The sou	arce of the compensation paid Debtor	to me was: Other (specify):				
3. The sou Debtor	arce of compensation to be pa	id to me is: Other (spe	ecify):			
	not agreed to share the above and associates of my law firm		with any o	ther perso	on unless they a	re
bankruptc a. Analysi file a petit b. Prepara c. Repress d. [Other Negotiati filing of r	In for the above-disclosed fee, by case, including: It is of the debtor's financial situation in bankruptcy; It it is a filling of any petition and filling of any petition as needed] It is a substitute of the debtor and the filling of the fillin	ation, and rendering advices, schedules, statement of rest meeting of creditors;	ce to the daffairs and	lebtor in do	etermining whe	ired;
Represen stay action II. Service The follo	tation of the debtors in any ons or any other adversary p es Included as Part of Repo wing are services, included a	dischargeability actions proceeding, adjourned a resentation, Subject to	s, judicial ppearanc an Additi	lien avoid es in Rocl onal Fee	lances, relief f hester or Buffa	
1. Repres provide r 2. Amend required 3. Opposi	may charge additional fees: entation at any continued n equired documents or accep lments, except that no fee sh as a result of attorney error ing Motions for Relief from	otable identification; all be charged for any a ;;				
5. Redem 6. Prepar 7. Repres 8. Motion	otions to Value. In partiage of the perion of the period	roof of Claims, when ap miss or Convert debtor's le Automatic Stay;	propriate s case;			stration

III. Additional Services Not Included in the Initial Fee Which Will Require a Separate Fee

Agreement

The following services are not included as part of the representation in a Chapter 7 case, unless the attorney and debtor negotiate representation in these post-filing matters at mutually agreed upon terms in advance of any obligation of the attorney to render services. Unless a new fee agreement is negotiated between debtor and attorney, attorney will not be required to represent the debtor in these matters:

- 1. Defense of Complaint to Determine Non-Dischargeability of a Debt or filing Complaint to Determine Dischargeability of Debt;
- 2. Defense of a Complaint objecting to discharge;
- 3. Objections to Claim of Exemption, except where an objection arises due to an error on Schedule C;
- 4. Sheriff levy releases;
- 5. Section 522(f) Lien Avoidance Motions;
- 6. Opposing a request for, or appearing at a 2004 examination;
- 7. All other Motions or Applications in the case, including to Buy, Sell, or Refinance Real or other Property;
- 8. Motions or other proceedings to enforce the automatic stay or discharge injunction;
- 9. Filing or responding to an appeal;
- 10. An audit of the debtor's case conducted by a contract auditor pursuant to 28 U.S.C. Section 586(f).

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: 6/24/2024 /s/ Mark E Lewis

UNITED STATES BANKRUPTCY COURT DISTRICT OF Western New York

Deanna J, Walker In re)	
[Set forth here all names including married, m names used by debtor within last 8 years.]	aiden, and trade))	
Do	ebtor)) Case No.)	
Last four digits of Social Security No Employer Tax Identification (EIN) No) Chapter Ch)	napter 7
CERTIFICAT	ON OF MAILING MA	TRIX.	
Deanna J, Walker I (we),		, the attorne	ey for the
debtor/petitioner (or, if appropriate,	the debtor(s) or petitio	ner(s)) hereby ce	rtify under
the penalties of perjury that the abo	ve/attached mailing m	atrix has been co	mpared to
and contains the names, addresses	zip codes and, if requ	ired, account nun	nbers in
redacted form, of all persons and e	ntities, as they appear	on the schedules	s of
liabilities/list of creditors/list of equity	security holders, or a	ny amendment th	ereto filed
herewith.			
Dated: 6/24/2024	/s/Deanna J, Wa	alker	
2 3.0 3.		Debtor/Petitioner Petitioner(s)	_

F:LR1007(01/29/2013)